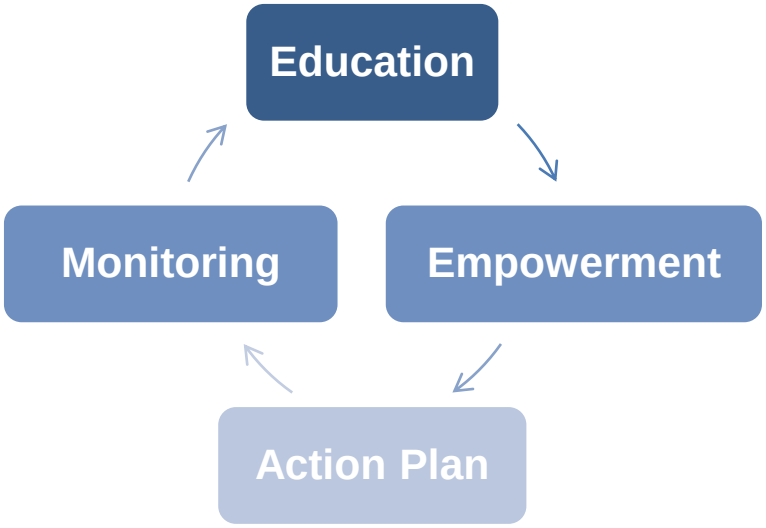
BOX 1. The PEACH study telephone coaching intervention adapted from the COACH programme[25 26]

Each practice nurse from practices randomised into the intervention group received modified COACH programme training over two days. The nurses were trained in an empowerment-based[42] pragmatic educational intervention that provides self-management support for patients with type 2 diabetes. The coaching intervention aims to build patients' self-efficacy and sense of autonomy to address their lifestyle and biochemical targets in conjunction with their general practitioners. The coaching covered lifestyle and biochemical goals and used information, shared goal-setting and action planning to empower patients to self-manage their diabetes and have their medications reviewed and intensified by their general practitioners.

The modified COACH program consisted of the following stages:



Education: Finding out what the patient knows and informing the patient what they should know about risk factors, targets and treatment.

Empowerment: Patients are persuaded to ask their own doctor(s) for tests and results for glycated haemoglobin (HbA_{1c}), cholesterol, blood pressure, weight, and for appropriate prescription of medications, altering doses or changing a medication if necessary.

Action Plan: Negotiating a plan of action with the patient to be achieved by the next coach session.

Monitoring: Checking if action has taken place since the previous coaching session and then using this information as the basis for the next coaching session.

Continuous quality improvement framework: Iteration of each process (Stages 1 – 4) towards target.

Following the training, practice nurses in the intervention group were instructed to make 8 coaching calls over 18 months. The first 5 calls were on a six-weekly basis in the first 6 months, then two 3-monthly calls between 6 and 12 months and a final coaching call at 15 months.

Each coaching session was individualised based on the patient's risk factors and the stage of coaching. Practice nurses used a paper based coaching form to record each coaching session. After each coaching call, the practice nurse entered the coaching session data into the COACH programme software. A letter was then generated with one copy going to the patient and another copy kept at the general practice.